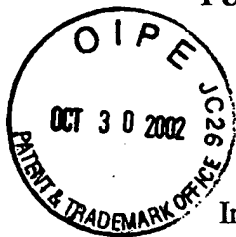


#19/F  
1-6-03  
W

FUJ2-AZ72a

PATENT APPLICATION



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

TECH CENTER 1600/2900

NOV 01 2002

RECEIVED

In re Application of:

Yasuo Yamao, et al.

Serial No.: 09/511,824

Filed: February 24, 2000

For: IMMUNOASSAY METHOD FOR  
LYSED WHOLE BLOOD

Patent Examiner: Gailene Gabel

Art Unit: 1641

October 24, 2002

Irvine, California 92614

RESPONSE TO OFFICE ACTION

Assistant Commissioner for Patents  
Washington, D.C. 20231

Dear Sir:

Responsive to the Office Action of April 26, 2002, kindly amend the above-identified application as follows.

IN THE CLAIMS

Please add the following newly drafted Claims 13-23.

- 1           13. (New) An agglutination immunoassay method of quantifying a
- 2   predetermined antigen in a sample of whole blood, comprising the steps of:
- 3           providing a sample of the whole blood;
- 4           adding a hemolysis reagent and a latex reagent directly to the sample of
- 5   the whole blood without any pre-treatment of the whole blood;

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No.	
Applicant(s): Yasuo Yamao et al.				FUJ2-AZ72a	
Serial No. 09/511,824	Filing Date 2/24/2000	Examiner Gailene Gabel	Group Art Unit 1641		
Invention: IMMUNOASSAY METHOD FOR LYMPHOCYTE BLOOD				RECEIVED NOV 01 2002 TECH CENTER 1600/2900	
TO THE ASSISTANT COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	14 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	3 -	3 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input type="checkbox"/> No additional fee is required for amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> A check in the amount of \$920.00 to cover the Request for 3 Month Extension of Time					
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 19-2814 A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.					
<input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
Joseph W. Price Reg. No. 25,124 SNELL & WILMER LLP 1920 Main Street, Suite 1200 Irvine, CA 92614 Tel: 949-253-2700		Dated: October 25, 2002			
Signature					
I certify that this document and fee is being deposited on 10/25/02 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.					
Signature of Person Mailing Correspondence					
Candy Neu					
Typed or Printed Name of Person Mailing Correspondence					

CC: